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Atty Docket No. 015114-053500U3

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Tse W. Chen

Group Art Unit 21-6

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**FOR THE PERSONAL ATTENTION OF**  
**EXAMINER Tse W. Chen**

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I hereby certify that the following documents in re Application of ANDREW CROSLAND et al., Application No. 09/880,734, filed June 12, 2001 for EMBEDDED PROCESSOR WITH WATCHDOG TIMER FOR PROGRAMMABLE LOGIC are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form, PTO/SB/21 (1 page);
2. Petition for Extension of Time, PTO/SB/22 (1 page, in duplicate); and
3. Amendment (8 pages).

Number of pages being transmitted, including this page: -12-

Dated: June 19, 2006

  
Rosario G. Ysip

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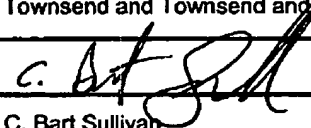
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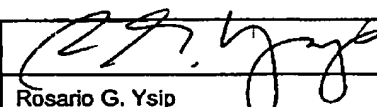
JUN 19 2006

PTO/SB/21 (06 04)

<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/880,734
	Filing Date	June 12, 2001
	First Named Inventor	Crosland, Andrew
	Art Unit	2116
	Examiner Name	Tse W. Chen
	Attorney Docket Number	015114-053500US
Total Number of Pages In This Submission		-11-

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to T <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
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